

Application Information

Applicant Information

Initial 01/07/04

State or Province of mailing address:: NY
Postal or Zip Code of mailing address:: 14075

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Barry
Middle Name:: A.
Family Name:: May
City of Residence:: Lockport
State or Province of Residence:: NY
Country of Residence:: US
Street of mailing address:: 4733 Townline Road
City of mailing address:: Lockport
State or Province of mailing address:: NY
Postal or Zip Code of mailing address:: 14094

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Thomas
Middle Name:: D.
Family Name:: Roman
City of Residence:: Niagara Falls
State or Province of Residence:: NY
Country of Residence:: US
Street of mailing address:: 2535 Nicole Drive
City of mailing address:: Niagara Falls
State or Province of mailing address:: NY
Postal or Zip Code of mailing address:: 14304

Correspondence Information

Correspondence Customer Number:: 07278

Representative Information

Representative Customer Number:: 07278